## **SAMPLE LINE-ITEM BUDGET**

## Your Organization's Name

Official U.S. Presentation at the 15th International Architecture Exhibition, Venice, Italy

June through November, 2016

		Unit Cost						
		Unit	Number	Amount	Rate	Requested Federal Funds from ECA	Cost-Share by Applicant	Program Total
Α	Personnel	months or years		salary (month or year)	% effort			
A.1	US-Based personnel							
A.1.1	Project Manager					0.00		0.00
A.1.2	Project Officer, etc.					0.00		0.00
A.2	Field Personnel							0.00
A.2.1	ie, etc.					0.00		0.00
A.2.2	ie, etc.					0.00		0.00
Subtotal	Personnel	•	•	·		0.00	0.00	0.00
В	Fringe Benefits							
B.1	US-Based Personnel Fringe Benefits							0.00
B.2	Field Personnel Fringe Benefits							0.00
Subtotal	Fringe Benefits	<u> </u>	<u> </u>	l	<u> </u>	0.00	0.00	0.00
С	Travel	# people	# days	Cost	% effort			
C.1	Airfare international (fromto, one		<u> </u>			0.00		0.00
	way/RT?)				100%	0.00		0.00
C.1.1	Per diem (Country/City)	<u> </u>			100%			0.00
C.2	Domestic Travel Only	г	Г	ı	1			0.00
C.2.1	ie local staff per diem for monitoring	<u></u>	<u> </u>		100%	0.00	0.00	0.00 <b>0.00</b>
Subtotal			и •.	•		0.00	0.00	0.00
<b>D</b>	Equipment (> \$5,000 per unit)	ı	# units	unit cost	1	0.00		0.00
D.1 D.2	(description, ie generators)					0.00		0.00
	(description)				ļ		0.00	0.00
	Equipment		и •.	•		0.00	0.00	0.00
E	Supplies (< \$5,000 per unit)	I	# units	unit cost	l I	0.00		
E.1	(description)	L	L			0.00	0.00	
	Supplies					0.00	0.00	
F	Contractual (Consultant fees)							
	Contractual Sub grantee #1 (NAME)	<u> </u>	ı	I				0.00
F.1.1	Personnel							0.00
F.1.2	Fringe Benefits (if applicable)							0.00
F.1.3	Travel (if applicable)	# people	# days	Cost	1			0.00
F.1.3.						0.00		0.00
F.1.3.						0.00		0.00
F.1.4	all else that applies, expenses separately							0.00
Subto	tal sub grantee #1 (NAME)					0.00	0.00	0.00
Subtotal	Contractual (all sub grantees)					0.00	0.00	0.00
G	Contruction							
G.1	(description)					0.00	0.00	0.00
Н	Other Direct Costs			ı	1			
H.1	All else that does not fall into above categories							0.00
H.2	Insert indirect/overhead costs here if							
	organization does not have a NICRA	L						0.00
Subtotal	Other Direct Costs					0.00	0.00	0.00

I	<b>Total Direct Costs</b>		0.00	0.00	0.00
J	Indirect Costs (NICRA %)	(indirect costs should be based on a NICRA rate accompanied with a copy of a valid NICRA agreement)	0.00	0.00	0.00
K	Total Project Cost	(must match award amount)	0.00	0.00	0.00